

# TLC DONATION REQUEST FORM

NAME OF GROUP OR PROJECT: \_\_\_\_\_

DATE OF EVENT OR PROJECT: \_\_\_\_\_

REASON FOR THE EVENT OR PROJECT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DONATION REQUEST: \_\_\_\_\_

\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

YOUR EMAIL ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

DO YOU SHOP AT TLC? YES NO

**\*\*\*PLEASE ATTACH A COPY OF A REQUEST LETTER ON THE ORGANIZATION'S LETTERHEAD. PLEASE INDICATE IF YOU ARE A 501 (C)(3).\*\*\***

**FOR YOUR DONATION REQUEST TO BE CONSIDERED, WE MUST RECEIVE YOUR REQUEST AT LEAST 30 DAYS BEFORE YOUR EVENT. WE RECEIVE A NUMBER OF DONATION REQUESTS EACH WEEK.**

EMAIL FORM TO: [donations@tlcgarden.com](mailto:donations@tlcgarden.com)

FAX FORM TO: 405-418-5605

MAIL FORM TO: TLC GARDEN CENTER, 105 W. MEMORIAL ROAD, OKC, OK 73114